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FORM D

Contained Contained Section

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Num	ber:	3235-0	2076			
Expires: Estimated	Apri	30.20	08			
Estimated	averaç	ge burder	1			
hours per r	espon	se1	6.00			

SEC USE ONLY						
Prefix	Serial					
DA	TE RECEIVED					
	1					

Filing Under (Check box(cs) that apply): Rule 504 Rule 505 Rule 506 Section 40 Type of Filing: New Filing Amendment	6) ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	Militaria IIII IIII IIII IIII IIII IIII IIII
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Vox AM/FM, LLC	08065622
Address of Executive Offices (Number and Street, City, State, Zip Code) 70 Walnut Street, Suite 411, Wellesley, MA 02481	Telephone Number (Including Area Code) 781-239-8018
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Res OF SS
Brief Description of Business	DEC 1 6 20 08
Radio station ownership	THOMSON PEU
	(please specify): ited Liability Company
Month Year Actual or Estimated Date of Incorporation or Organization: 0 2 0 0 0 Actual Est Iurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Sta CN for Canada; FN for other foreign jurisdiction)	imated te:

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

– ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		a Basigidi	entification data		
2. Enter the information r	equested for the fo	llowing:			
·		suer has been organized w	=		
					f a class of equity securities of the issue
Each executive of	ficer and director of	of corporate issuers and of	corporate general and ma	naging partners of	partnership issuers; and
 Each general and 	managing partner o	of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Danziger, Bruce G.	if individual)	····			
Business or Residence Addre 70 Walnut Street, Suite	•		ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Barlow, Burton					
Business or Residence Addre 1233 Sherburne Road, St		Street, City, State, Zip Co Burlington, VT 05403	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Thornas, Keith	if individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ede)		
PO Box 184, Jersey Shor	re, PA 17740		<u>. :</u>		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Vox Holding Company, LI	LC				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)	.	
70 Walnut Street, Suite 4	I11, Wellesley, M	MA 02481			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addres	ss (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Business or Residence Addres	ss (Number and	Street, City, State, Zip Co.	dc)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Business or Residence Addres	ss (Number and	Street, City, State, Zip Coo	de)	<u></u>	
	(Use blan	k sheet, or copy and use a	dditional copies of this sh	heet, as necessary)	<u></u>

		7.5		, B.	INFORMAT	TON ABO	T ÖFFER	ING A				
1. Has	the issuer so	ld. or does	the issuer i	intend to s	ell, to non-	accredited	investors i	n this offer	ing?		Yes	No ⊠
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?											_	
2. What is the minimum investment that will be accepted from any individual?										••••••	s_0.0	0
2 Daw	3. Does the offering permit joint ownership of a single unit?										Yes	No
												₫
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full Nam	c (Last name	first, if inc	dividual)									
Business	or Residence	: Address (Number an	d Street, C	ity, State,	Zip Code)					-	
Name of	Associated B	roker or De	caler	-								
States in	Which Perso	n Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers	3	·			-	
(Che	ck "All State	s" or check	individua	l States)		*************					☐ AI	l States
AL		ΑŹ	AR	CA	CO	CT	DE	DC	FL	GA	HI	(D)
IL MT		IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
RI		SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Nam	e (Last name	first, if ind	lividual)						<u> </u>	, ,		·
Business	or Residence	e Address (Number ar	d Street, C	City, State,	Zip Code)			· 			
Name of	Associated B	roker or De	aler									· · · · · · · · · · · · · · · · · · ·
0												
	Which Persoi ck "All State			-							[] Al	States
,							<u></u>					
	[AK]	[AZ]	KS	KY	[CO]	ME	MD	MA	FL MI	GA MN	MS MS	iD MO
MT	NE	NV	NH	NJ	NM)	NY	NC	ND	OH		OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name	(Last name	first, if ind	ividual)								_	
Business	or Residence	: Address (1	Number an	d Street, C	ity, State,	Zip Code)			·			
Name of A		oker or De	aler							 .	•••	
	·											
	Vhich Person											Ceasas
(Chec	k "All States	or check	ındıvıdual	States)	•••••	•••••	*************		•••••	•••••	AII	States
ĀĻ	AK	AZ	AR	CA)	CO	CT)	DE	DC	FL		HI MS	ID MO
IL M1	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI)		OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV		WY	PR

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Aiready Aggregate Type of Security Offering Price Sold Debt\$ 1,180,000.00 Common Preferred Convertible Securities (including warrants) \$_____**\$**___ Other (Specify Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number **Dollar Amount** of Purchases Investors s 1,180,000.00 Accredited Investors ______1 Non-accredited Investors Total (for filings under Rule 504 only) Answer glso in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of **Dollar Amount** Security Sold Type of Offering Rule 505 Rule 504 \$ 0.00 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs.... 20,000.00 Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) 20,000.00 Total

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	and total expenses furnished in response to Part C	ffering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gross		1,235,000.00
5.	Indicate below the amount of the adjusted gross each of the purposes shown. If the amount for	proceed to the issuer used or proposed to be used for rany purpose is not known, furnish an estimate and al of the payments listed must equal the adjusted gross		3
		`	Payments to Officers. Directors, & Affiliates	Payments to Others
	Salaries and fees		\$	_
	Purchase of real estate			. [] s
	Purchase, rental or leasing and installation of r	nachinery	s	
		facilities		
	Acquisition of other businesses (including the offering that may be used in exchange for the a issuer nursuant to a merger)	value of securities involved in this assets or securities of another	¬\$	П \$
	Working capital			s
			\$	
	Column Totals		_	
	Total Payments Listed (column totals added)		□ s <u>_1</u>	235,000.00
<u> (</u>];		D REDERAL SIGNATURE		
ign	ature constitutes an undertaking by the issuer to	the undersigned duly authorized person. If this notice furnish to the U.S. Securities and Exchange Commis accredited investor pursuant to paragraph (b)(2) of F	sion, upon writte	tle 505, the following in request of its staff,
ssu	er (Print or Type)	Signature	Date	
Vo:	x AM/FM, LLC	lette the	12/4/	08
		Title of Signer (Print or Type)		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE	***************************************	
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Vox AM/FM, LLC	lett st	12/4/08
Name (Print or Type)	Title (Print or Type)	
Keith Thomas	CFO	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

d .				ECT HAPPA	PENDIX			ve was s	
1	Intend to non-a investor	2 i to sell accredited es in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL							: 		
AK				<u> </u>					
ΑZ									
AR									
CA									
со									
CT									
DE				,					
DC									
FL									
GA									
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ID									
IL.									
IN									
IA									
KS									
KY			3: 25						
LA									
ME									
MD									
МА									
МІ									
MN									
MS									

1 N 10				APP	ENDÎX				i i	
1	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО										
МТ										
NE										
NV										
NH		×	1,255,000.00	1	\$1,180,000.	0			×	
NJ			-							
NM			_							
NY										
NC										
ND			,							
ОН										
OK										
OR										
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sc	-									
SD										
TN										
TX						-				
ŲT										
VT										
VA										
WA										
wv										
wı										

TAPPENDIX										
1	Intend to sell to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
PR										

